

NJ

*Substantiated
Abuse & Neglect
Child Fatality
Analysis*

for **1998 - 2002**

July 10, 2003

*People***FIRST**

NJ DEPARTMENT OF HUMAN SERVICES

GWENDOLYN L. HARRIS, COMMISSIONER

Information in this report is subject to change based upon continued investigation findings and a determination of abuse or neglect being established.

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EXECUTIVE SUMMARY

In 2001, abuse and neglect claimed the lives of 1,321 children, including 27 children in New Jersey. This equates to four children dying every day due to maltreatment nationally and one child dying about every 16 days in New Jersey.

This report presents an analysis of the 123 deaths caused by abuse or neglect in New Jersey between the years 1998 and 2002. It examines these fatalities for the purpose of recommending preventive interventions and strategies. Analysis of these data reveals that there are several notable trends in the characteristics of children in New Jersey who died from abuse and neglect from 1998 to 2002.

Demographics

- Most child deaths (70 or 57%) occurred under the age of one; almost 15% of the children died before they reached one month of age. Approximately 3% of the children who died were older than 10.
- Non-white children comprised more than 75% of all deaths. Black children made up almost 50% of all deaths, but more than 50% of the deaths of children under age one.

Manner of Death

- Children were most likely to die from physical abuse (40%). Almost 25% of all child deaths occurred at the hands of male perpetrators, either the father or another male.
- Lack of supervision accounted for one-quarter of all deaths. Drug use during pregnancy also led to a number of deaths (13%).

Family Status with DYFS at Time of Death

- Two-thirds, or 81, of the families of these children had some level of prior contact with DYFS. These families were either under DYFS supervision at the time of the child's death or had received DYFS services at some time in the past and their cases had been closed. Data were limited to the Comprehensive Child Abuse Prevention and Treatment Act (CCAPTA) initial reports. These data do not take into account that some cases may have not been known to DYFS prior to the incident, but due to prolonged hospital stay, the child was coded as an open DYFS case.
- DYFS was more likely to have had contact with those families whose children died due to a lack of supervision, medical neglect, or abuse in which the mother, father, or non-father male was the perpetrator.
- DYFS had contact with the family in 50% of the 12 cases in which death was due to Shaken Baby Syndrome.
- DYFS had no history of contact with families of children who were victims of newborn abandonment and homicide.

Geographic Variation

- More than 60% of all deaths occurred in five counties (Camden, Essex, Hudson, Middlesex, and Passaic). Essex and Camden counties comprised nearly one-third (33%) of the total deaths.
- Approximately 15% of all child deaths occurred in the area served by the Newark district offices and almost 33% of the deaths occurred in areas served by five other district offices—Atlantic, Camden Central, Perth Amboy, Bayonne, and Central Passaic.
- All of the fatalities from the Atlantic district office were either open cases with DYFS at the time of death or had been open previously but the cases had been closed. The Camden, Newark, Ocean County, and Central Passaic offices had a disproportionately large percentage of cases that were open at the time of the child's death.

Children Under One Year of Age

- Between 1998 and 2002, there was a marked increase in the proportion of deaths of children under one, from 40% of all child fatalities in 1998 to 67% in 2002.
- A greater percentage of children in this age group died from drug use by the mother during pregnancy, shaken baby syndrome, and physical abuse by the father, than all age groups combined.
- As compared to the total number of deaths, a greater portion of children under one were black (48% vs. 56%).
- A larger percentage of the younger children (89%) died while under the supervision of a parental caregiver than in the overall child death population (80%).
- DYFS had relatively less contact with the families of the children under age one who died (59%) than it did with the families of the overall child death population (66%).

INTRODUCTION

In 2001, abuse and neglect claimed the lives of 1,321 children in the United States, including 27 children in New Jersey. This equates to four children dying every day due to maltreatment nationally and one child dying about every 16 days in New Jersey (U.S. Department of Health and Human Services, 2001).

The rate of child fatalities due to abuse and neglect in New Jersey is similar to that in other states in the northeast. In 2001, state fatality data from the National Child Abuse and Neglect Data System (NCANDS) showed rates that ranged from a low of .32 deaths per 100,000 child population in New Hampshire to a high of 7.89 per 100,000 in Delaware. New Jersey's rate of 1.58 per 100,000 child population was comparable to its neighbors, Pennsylvania (1.65) and New York (1.67) (U.S. Department of Health and Human Services, 2001). It should be noted that NCANDS bases its rates on all child deaths attributed to abuse and neglect beyond those reported to State child protective services systems.

The rate of child fatalities due to abuse and neglect has grown at a faster rate than the total population of children. From 1998 to 2001, the child population in the United States grew 4.4 percent and in New Jersey 5.3 percent. However, child fatalities increased 18.1 percent nationally and 13.8 percent in New Jersey (U.S. Department of Health and Human Services, 1998 and 2001). Department of Justice data show that abuse and neglect have increased in the 1990's, even while crime rates have generally declined (www.childabuse.com/incabuse.htm).

It is therefore crucial to better understand the factors contributing to child fatalities arising from abuse and neglect. This is especially important because while any death is tragic, most child fatalities from abuse and neglect are very young. Almost 85 percent of child fatalities from abuse and neglect in the United States occurred among children who were less than five years old, and 41 percent of these children had not reached their first birthday. In New Jersey, the proportion of fatalities from abuse and neglect among children who are less than a year old is now more than 50 percent.

This report represents an analysis of the 123 deaths due to abuse or neglect in New Jersey that occurred between the years 1998 and 2002. It examines the etiology of fatalities in order to further explore and recommend interventions and strategies.

METHODOLOGY

The data in this report are from child death summary reports created by the New Jersey Division of Youth and Family Services (DYFS). Additional data come from the DYFS child death media reports, which are created under federal Comprehensive Child Abuse Prevention and Treatment Act (CCAPTA) regulations. These reports are created to provide the media with information about child deaths that are regulated by CCAPTA. Information in this report is dependent upon continued investigations and thus findings and information may change. Information was collected and entered in a statistical database for analysis. The selection of possible correlates was based on identified key variables in the literature associated with predictors of child death due to abuse or neglect. Specifically, this report focuses on the demographic and possible ecologic correlates to child maltreatment deaths within New Jersey. However, one limitation of this report is that it relies on summaries of case record data, so it is sometimes difficult to get a complete picture of all the factors that led to the incident.

RESULTS

The following results describe the demographics and other characteristics of the 123 deaths that occurred during the five-year period from 1998 to 2002, including the manner of the deaths, the DYFS status of cases at the time of death and the DYFS administrative and geographic region where the fatality occurred.

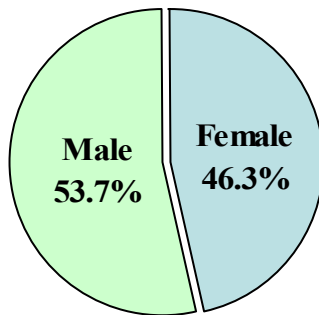
DEMOGRAPHICS AND CHARACTERISTICS

Child Age at Death

	Frequency	Percent
Up to one month old	18	14.6
Over a month to one year old	52	42.3
One to two years old	15	12.2
Over two to three years old	8	6.5
Over three to five years old	9	7.3
Over five to nine years old	17	13.8
Ten years old & over	4	3.3
Total	123	100.0

- Children age one and under account for almost 57% of all deaths.
- 14.6% of all cases were younger than one month at death.
- Nearly all child deaths (96.7%) occurred before the age of 10.

Gender of Child Deaths 1998-2002



- Male children accounted for slightly more than half (53.7%) of all child deaths.

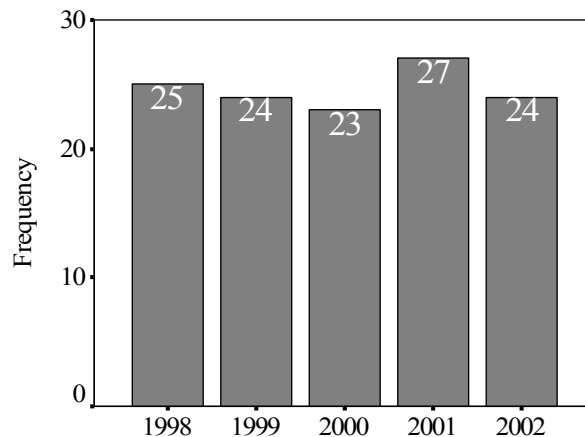
Race/Ethnicity of Child

	Frequency	Percent
White	29	23.6
Black	59	48.0
Hispanic	22	17.9
Asian	2	1.6
Other	11	8.9
Total	123	100.0

Note: Race/Ethnicity is either self reported or reliant upon DYFS staff estimation.

- More than three-quarters (76.4%) of the child deaths were non-white.
- Black children comprised 48.0% of the cases, compared to 23.6 % for white children.
- The racial distribution for deaths is disproportionate to the 2000 New Jersey child population. Black children accounted for 15.6% of this population, whereas white children accounted for 59.4% of this population.
- Hispanic children comprised 17.9% of child deaths and 16.2% of the state child population.

Child Deaths Due to Abuse or Neglect by Year



- The number of child deaths in New Jersey due to substantiated abuse and neglect has remained relatively stable over the five year report period. However, the child population in New Jersey increased over this time period from 1,994,627 in 1998 to 2,087,558 in 2000. This resulted in a decrease in the child death rate from 1.3 per 100,000 children in 1998 to 1.1 per 100,000 in 2000. However, based on population projections, the rate increased to 1.3 in 2001 but then declined to 1.1 per 100,000 in 2002.
- Most child deaths occur before the age of one and that rate has increased since 1998.

Percent of Child Deaths Due to Abuse/Neglect by Ethnicity by Year

	White	Black	Hispanic	Asian	Other	Total
1998	44.0	36.0	8.0	4.0	8.0	100.0
1999	8.3	58.3	20.8	4.2	8.3	100.0
2000	26.1	47.8	21.7	0.0	4.3	100.0
2001	18.5	55.6	14.8	0.0	11.1	100.0
2002	20.8	41.7	25.0	0.0	12.5	100.0
Number of Total Deaths	29	59	22	2	11	123

Note: Percentages in this and other tables may not sum to exactly 100 percent due to rounding.

- White children comprised a disproportionately large percentage of fatalities in 1998, and a disproportionately small percentage in 1999. However, since 2000, the percentage of all child deaths accounted for by white children has averaged about 22% a year.
- The percentage of all child deaths accounted for by black children has averaged 51% of the total number of deaths due to abuse and neglect after a low of 36% in 1998.
- Hispanics have averaged 21% of all child deaths after 1998, when 8% of these deaths involved Hispanic children.

Note: No marked differences were found when comparing cause or circumstance of child deaths by year.

MANNER OF CHILD DEATH AND CIRCUMSTANCE SPECIFICS*Manner of Child Death*

	Frequency	Percent
Physical Abuse/Intent to Injure		
Abuse – Father	17	13.8
Abuse - Other Male	13	10.6
Abuse – Mother	14	11.4
Abuse - Other	4	3.3
Abuse – Unknown	1	0.8
Subtotal	49	39.8
Unintentional Injury		
Inadequate Supervision - Misc.	15	12.2
Inadequate Supervision – Pool	5	4.1
Inadequate Supervision – Fire	5	4.1
Inadequate Supervision – Bathtub	3	2.4
Subtotal	28	22.8
Undetermined/Other		
Neglect	6	4.9
Drug Use During Pregnancy	16	13.0
Shaken Baby	12	9.8
Newborn Abandoned/Killed	3	2.4
Medical Neglect	5	4.1
Other or Unknown	4	3.3
Subtotal	46	37.4
Total	123	100.0

- Physical abuse was the leading manner of death for the five-year period, accounting for almost 40% of the child deaths.
- Of the 49 physical abuse cases, 30, or 61%, were committed by the father or another male, and 14 or 29%, were committed by the mother.
- 10% of all cases were shaken baby deaths. The perpetrator was the father, boyfriend or other male in eight of these cases¹; the mother in two instances, and the mother or father in two cases.
- A lack of supervision accounted for 22.8% of all child deaths.
- Drug use during pregnancy was the manner of death in 13% of the cases and situations of neglect and medical neglect were cited in 9% of the cases.

Supervision at Time of Child Death

	Frequency	Percent
Mother	49	50.0
Father	20	20.4
Mother/ Father	9	9.2
Relative of Child	5	5.1
Sibling of Child	4	4.1
Boyfriend	5	5.1
Other male	3	3.1
Other female	2	2.0
None	1	1.0
Total	98	100.0

- Of the 98 children whose supervisor was known, 79.6% died while under the supervision of a parental caregiver.
- Supervision was the responsibility of non-relative caregivers in the case of ten, or 10.2%, of these child deaths.

Note 1: Supervision variable represents person who was supervising child at time of death and does not necessarily denote custodial responsibility.

Note 2: Supervision at time of death could only be determined for 98 of the 123 cases

¹ A study from 1995 by the US Advisory Board on Child Abuse and Neglect found that most physical abuse fatalities were caused by angry males in the home reacting to “triggers” such as crying or failed toilet training.

CHILD DEATH DYFS STATUS AND GEOGRAPHIC SPECIFICS*DYFS Case Status at Time of Child Death*

	Frequency	Percent
Open Case	48	39.0
Closed Case	33	26.9
No Contact w/ DYFS	42	34.1
Total	123	100.0

- DYFS had current or prior contact with the families in almost two-thirds (65.9%) of all child death cases.

County Where Child Death Occurred

	Frequency of Child Deaths	Percent Child Deaths	Percent Children in Population	Cumulative Child Death Rate Over a 5-Year Period per 100,000
Atlantic	8	6.5	3.1	12.5
Bergen	0	0.0	9.7	-
Burlington	6	4.9	5.1	5.6
Camden	14	11.4	6.5	10.3
Cape May	2	1.6	1.1	8.8
Cumberland	3	2.4	1.8	8.1
Essex	26	21.1	9.9	12.6
Gloucester	2	1.6	3.2	3.0
Hudson	11	8.9	6.6	8.0
Hunterdon	3	2.4	1.5	9.6
Mercer	2	1.6	4.0	2.4
Middlesex	12	9.8	8.5	6.7
Monmouth	1	0.8	7.7	0.6
Morris	4	3.3	5.6	3.4
Ocean	6	4.9	5.7	5.0
Passaic	12	9.8	6.1	9.4
Salem	3	2.4	0.8	18.2
Somerset	0	0.0	3.6	-
Sussex	1	0.8	1.9	2.5
Union	6	4.9	6.2	4.6
Warren	1	0.8	1.3	3.7
State Total	123	100.0	100.0	5.9

- Salem, Atlantic, and Essex counties had the highest rates of child deaths within the State.

- More child deaths occurred in Essex and Camden than in any other county. Nearly one-third (32.5%) of all child deaths occurred in these two counties.

- Another 28.5% of the child deaths occurred in Middlesex, Passaic, and Hudson counties.

- The remaining child deaths were distributed among 14 counties throughout the state. Bergen and Somerset counties had no child deaths in these years.

Note: Child death rate is calculated using the number of child deaths due to abuse and neglect over the five-year period and county population data for children from the 2000 U.S. Census.

DYFS Region Where Child Death Occurred

	Frequency	Percent
Metro	43	35.0
South	37	30.1
North	31	25.2
Central	10	8.1
Adoption	2	1.6
Total	123	100.0

- Of the child deaths, 60.2% occurred in the North and Metro DYFS regions; 38.2% occurred in the South and Central regions, with the Central region comprising only 8.1% of total child deaths.

Child Deaths by Reporting DYFS Office 1998-2002

	Frequency	Percent of State	Percent of Region
Southern Region			
Atlantic	7	5.7	18.9
Burlington	6	4.9	16.2
Camden North	6	4.9	16.2
Camden Central	8	6.5	21.6
Cape May	2	1.6	5.4
Cumberland	3	2.4	8.1
Gloucester	2	1.6	5.4
Salem	3	2.4	8.1
Central Region			
Hunterdon	1	0.8	10.0
Mercer	2	1.6	20.0
Southern Monmouth	1	0.8	10.0
Northern Monmouth	0	0.0	0.0
Somerset	0	0.0	0.0
Ocean	6	4.9	60.0
Metro Region			
Newark DO 1	7	5.7	16.3
Newark DO 2	7	5.7	16.3
Newark DO 3	5	4.1	11.6
East Orange	3	2.4	7.0
Bloomfield	3	2.4	7.0
Edison	3	2.4	7.0
Perth Amboy	9	7.3	20.9
Union-West	3	2.4	7.0
Union-East	3	2.4	7.0
Northern Region			
Bergen	0	0.0	0.0
Bayonne	9	7.3	29.0
Jersey City	3	2.4	9.7
North Hudson	1	0.8	3.2
Morris	4	3.3	12.9
Central Passaic	7	5.7	22.6
Northern Passaic	5	4.1	16.1
Sussex	1	0.8	3.2
Warren	1	0.8	3.2
ARCs			
Central ARC	1	0.8	50.0
Metro ARC	1	0.8	50.0
Northern ARC	0	0.0	0.0
Essex ARC	0	0.0	0.0
Metro-Edison ARC	0	0.0	0.0
Metro-Select ARC	0	0.0	0.0
Total	123	100.0	

- The Camden district offices reported 11.4% of all New Jersey child deaths due to neglect or abuse for 1998-2002.
- The Camden Central district office reported almost 22% of the Southern Region's child deaths.
- The Ocean district office accounted for 60% of the child deaths within the Central Region.
- The 19 deaths in Newark accounted for 15.5% of the 123 child deaths due to abuse or neglect between 1998 and 2002.
- Child deaths reported to the Newark district offices made up slightly more than 44% of all cases within the Metro Region.
- The Perth Amboy and Bayonne district offices reported the highest number (9) of child deaths for the five-year reporting period.
- The two Passaic district offices accounted for almost 39% of the Northern Region's child deaths.

Child Deaths Case Status by Reporting DYFS Office with More Than Five Deaths, 1998-2002

District Office	Open	Closed	No Contact w/ DYFS	Total	Percent of Total Fatalities
Newark	8	4	7	19	15.5
Camden	8	2	4	14	11.4
Perth Amboy	1	1	7	9	7.3
Bayonne	2	2	5	9	7.3
Atlantic	3	4	0	7	5.7
Burlington	0	3	3	6	4.9
Central Passaic	5	1	1	7	5.7
Ocean	4	1	1	6	4.9
Northern Passaic	1	3	1	5	4.1
Subtotal	32	21	29	82	66.7
All Other District Offices	16	12	13	41	33.3
Total	48	33	42	123	100.0

- Two-thirds (66.7%) of all child deaths were reported from the 9 district offices indicated in the table above.
- Of the 19 child abuse and neglect deaths reported to Newark Offices, 12, or 63.2 %, were known to DYFS; 8, or 42%, were open DYFS cases.
- Ten, or 71.4%, of the 14 cases reported to the Camden district offices were known to DYFS, i.e., either open at the time the child died or closed DYFS cases.
- Seven of the nine children who died in Perth Amboy were not known to DYFS.
- None of the six fatalities reported to the Burlington district office was an open case with DYFS at the time the child died. Three of the children's cases had been closed in the past and three of the children had never had contact with DYFS.
- All of the child death cases reported to the Atlantic district office were either open or closed DYFS cases.
- There was no appreciable percentage difference in case status between those offices with more than five child deaths compared to those with fewer than five deaths.

Frequency of Manner of Child Death by Status of Case

	Open	Closed	No Contact with DYFS	Total
Physical Abuse/Intent to Injure				
Abuse – Father	7	2	8	17
Abuse – Other Male	5	3	5	13
Abuse – Mother	6	4	4	14
Abuse – Other	2	0	2	4
Abuse – Unknown	0	1	0	1
Unintentional Injury				
Inadequate Supervision - Misc.	5	7	3	15
Inadequate Supervision – Pool	3	0	2	5
Inadequate Supervision – Fire	0	3	2	5
Inadequate Supervision - Bath	2	0	1	3
Undetermined/Other				
Neglect	1	3	2	6
Drug Use During Pregnancy	11	4	1	16
Shaken Baby	3	3	6	12
Newborn Abandoned/Killed	0	0	3	3
Medical Neglect	2	3	0	5
Other or Unknown	1	0	3	4
Total	48	33	42	123

- In several categories of manner of death, a large proportion of families involved had prior contact with DYFS:
 - Of the 16 deaths due to drug use during pregnancy, 15, or 93.8%, of the cases were either open at time of death or closed prior to the child's death. Six, or 37.5%, of all drug-use-during-pregnancy cases were open prior to the incident; four cases, or 25%, were opened for the first time after the incident (i.e., the child's birth) but prior to the child's death.
 - Of the 15 deaths due to miscellaneous lack of supervision, 12, or 80%, of the families had contact with DYFS. Five of these 12 cases were open at the time of the child's death, and seven were closed.
 - All of the families with child deaths due to medical neglect had contact with DYFS. Of these five cases, two were open and three had been closed.
 - Eight, or 61.5%, of the 13 cases involving abuse by other males had contact with DYFS; this included 38.5% with open cases at the time of death.
 - Ten, or 42.8%, of the 14 cases involving abuse by the mother had contact with DYFS; this included six, or 43%, with open cases at the time of death.

- There was no DYFS involvement in a large percentage of other types of cases. For example, DYFS was not involved in:
 - Three cases of newborn abandonment and homicide.
 - Six, or 50%, of the 12 cases of shaken baby syndrome.

CHILD DEATH DEMOGRAPHIC COMPARISON SPECIFICS

This section profiles child deaths by age for deaths occurring between 1998 and 2002. A specific focus is on deaths among children younger than one year of age.

Age at Time of Child Death by Gender & by Ethnicity

	Male	Female			White	Black	Hispanic	Other	
	%	%	N		%	%	%	%	N
Up to one year old	55.7	44.3	70		14.3	55.7	17.1	12.8	70
One to two years old	46.7	53.3	15		40.0	33.3	13.3	13.3	15
Over two to three years old	50.0	50.0	8		12.5	37.5	25.0	2.5	8
Three to five year old	66.7	33.3	9		44.4	33.3	22.2	-	9
Five to nine years old	41.2	58.8	17		29.4	47.1	23.5	-	17
Ten years old & over	75.0	25.0	4		75.0	25.0	-	-	4
Total	53.7	46.3	123		23.6	48.0	17.9	10.5	123

The distribution of deaths between males and females varies depending on the each age category. The percentage of female deaths ranged from a low of 25% for those 10 years of age and over to a high of 58.8% for those five-to-nine-years old. However, the overall distribution is generally balanced. Male children are slightly more likely to be victims; almost 54% of all child deaths are male.

The distribution of deaths by ethnicity also shows similar variation:

- Black children make up the largest proportion of the newborn to one year old deaths (55.7%).
- At older ages, the proportion of deaths among white children increases.
- Deaths among Hispanic children are relatively consistent across all age groups.

Manner of Child Death by Age of Child

	INTENTIONAL INJURY					UNINTENTIONAL INJURY				UNDETERMINED/OTHER						Total N	% of Total
	Physical Abuse By Percent					Inadequate Supervision By Percent				By Percent							
	Father	Other Male	Mother	Other	Unknown	Misc	Pool	Fire	Bath	Drug Use Pregnancy	Abandoned Baby	Shaken Baby	Medical Neglect	Neglect	Un-known		
Up to one year old	15.7	4.3	10.0	4.3	0.0	8.6	0.0	1.4	4.3	22.9	4.3	12.9	2.9	4.3	4.3*	70	100.0
One to two year old	20.0	26.7	6.7	-	-	13.3	13.3	-	-	-	-	6.7	-	13.3	-	15	100.0
Over two to three year old	25.0	12.5	12.5	-	-	12.5	12.5	12.5	-	-	-	12.5	-	-	-	8	100.0
Three to five year old	-	33.3	22.2	11.1	-	22.2	-	-	-	-	-	-	11.1	-	-	9	100.0
Five to nine year old	5.9	5.9	11.8	-	5.9	17.6	11.8	17.6	-	-	-	5.9	11.8	-	5.9	17	100.0
Ten year old & over	-	25.0	25.0	-	-	25.0	-	-	-	-	-	-	-	25.0	-	4	100.0
% of Total Deaths (N=123)	13.8	10.6	11.4	3.3	.8	12.2	4.1	4.1	2.4	13.0	2.4	9.8	4.1	4.9	*3.3		100.0
Total N	17	13	14	4	1	15	5	5	3	16	3	12	5	6	4	123	

- Almost 23% of all child deaths under one year old were from drug use during the mother's pregnancy.
- More than 26% of all deaths under one year of age were from physical abuse by either the father or the mother of the child.
- Of those deaths that occurred before the age of one:
 - Nearly 13% were from shaken baby syndrome.
 - More than 14% were due to a lack of supervision
- Among children older than three, the father was less likely than others to be the perpetrator of physical abuse.
- Non-intentional injuries are more likely to be the manner of death as children grow older.

*Includes one case still under DYFS review of substantiated abuse

PROFILE OF CHILD DEATHS UNDER ONE YEAR OF AGE

Demographics and Characteristics

Ethnicity of Children under One Year of Age who died due to Abuse/Neglect

	Frequency	Percent
White	10	14.3
Black	39	55.7
Hispanic	12	17.1
Asian	1	1.4
Other	8	11.4
Total	70	100.0

- 85.7% of children were non-white.
- White children comprise 24% of all child deaths and 14% of deaths that occurred among children under one year of age.
- Black children comprise 48% of all child deaths and 56% of deaths that occurred among children under one year of age.

Gender of Children under One Year of Age Who Died Due to Abuse/Neglect

	Frequency	Percent
Male	39	55.7
Female	31	44.3
Total	70	100.0

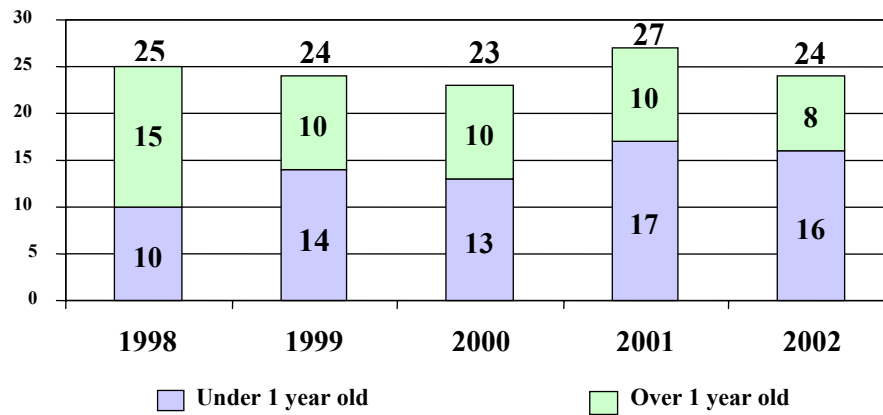
- Boys under one were more likely than girls to die from abuse/neglect.
- There was little difference between the percentage of children under one year of age who died from abuse or neglect who were male (55.7%) compared to the percentage of children of all ages that died from abuse and neglect who were male (53.7%).

Number of Children under One Year of Age Who Died Due to Abuse/Neglect by Year

	Frequency	Percent
1998	10	40.0
1999	14	58.3
2000	13	56.5
2001	17	63.0
2002	16	66.7
Total	70	100.0

- Recently, the number of child deaths has undergone a substantial increase. Of all cases in the past five years, 33 of the 70 (47%) occurred during 2001 and 2002.
- The proportion of children who died before age one has risen from a low of 40% in 1998 to a high of 66.7% in 2002.

Proportion of Child Deaths under the Age of One to the Total Deaths by Year



- There has been a marked increase in the proportion of children who died before the age of one. In 1998, this number was 40%; in 2002, it was 66.7%.
- A contributing factor to this increase may be the number of deaths due to maternal substance abuse during pregnancy. In 1998, 8% of the child deaths were attributed to drug use during pregnancy. The percentage of these cases increased to 17% in 1999, 19% in 2001 and 21% in 2002.

Manner of Child Deaths under One Year of Age

	Frequency	Percent
Direct Abuse/Intent to Injure		
Abuse - Father	11	15.7
Abuse - Other Male	3	4.3
Abuse - Mother	7	10.0
Abuse - Other	3	4.3
Abuse – Unknown	0	0
Unintentional Injury		
Inadequate Supervision - Misc.	6	8.6
Inadequate Supervision –Pool	0	0
Inadequate Supervision –Fire	1	1.4
Inadequate Supervision -Bathtub	3	4.3
Undetermined/Other		
Neglect	3	4.3
Drug Use During Pregnancy	16	22.9
Shaken Baby	9	12.9
Newborn Abandoned/Killed	3	4.3
Medical Neglect	2	2.9
Other or Unknown	3	4.3
Total	70	100.0

- Intentional injury cases accounted for 34.2% of all deaths under the age of one.
- Shaken baby syndrome and newborn abandonment or homicide accounted for 17.2% of all deaths.
- Lack of supervision contributed to 14.3% of all deaths.
- Of children under the age of one, the predominant manner of death was drug use during pregnancy. This was a factor in 22.9% of all deaths.

Supervision at Time of Child Death for Children under One Year of Age

	Frequency	Percent
Mother	35	62.5
Father	12	21.4
Mother/ Father	3	5.4
Boyfriend	3	5.4
Other male	1	1.8
Other female	2	3.5
Relative of Child	0	0
Sibling of Child	0	0
None	0	0
Total	56	100.0

- 89.3% of all child deaths occurred while under the supervision of a parent. Only 10.7% of deaths occurred while children were under the supervision of non-relatives.

Note 1: Supervision variable represents person who was supervising child at time of death and does not necessarily denote custodial responsibility

Note 2: Supervision cannot be determined for 14 of the 70 cases under one year of age.

DYFS Case Status for Child Deaths under the Age of One

	Frequency	Percent
Open	26	37.1
Closed	15	21.4
Not Known to DYFS	29	41.4
Total	70	100.0

- More than half of the families (58.5%) had contact with DYFS. This means DYFS had a case open currently or a case had been closed previously.

County Where Death Occurred for Children under Age of One

	Number Infant Deaths	Percent Infant Deaths	Percent of Infants in Population	Infant Death Rate Over a 5-Year Period per 10,000
Atlantic	2	2.9	2.8	6.4
Bergen	0	0.0	9.6	-
Burlington	3	4.3	4.8	5.7
Camden	11	15.6	6.1	16.4
Cape May	1	1.4	0.9	10.4
Cumberland	2	2.9	1.6	11.0
Essex	14	20.0	10.5	12.0
Gloucester	0	0.0	2.8	-
Hudson	6	8.6	7.4	7.3
Hunterdon	2	2.9	1.4	12.8
Mercer	2	2.9	3.8	4.7
Middlesex	6	8.6	8.9	6.2
Monmouth	1	1.4	7.1	1.2
Morris	2	2.9	5.8	3.1
Ocean	3	4.3	5.6	4.8
Passaic	7	10.0	6.6	9.9
Salem	2	2.9	0.7	25.9
Somerset	0	0.0	4.0	-
Sussex	0	0.0	1.6	-
Union	5	7.0	6.6	6.8
Warren	1	1.4	1.3	7.2
State Total	70	100.0	100.0	6.3

- 35.6% of all deaths of children under one occurred in Essex and Camden counties.
- Hudson, Middlesex, Passaic, and Union counties each had five or more child deaths during this period.
- Four counties had no deaths of children under one.

Note: Infant death rate is calculated using the number of infant deaths due to abuse and neglect over the five-year period and county population data for children under one from the 2000 U.S.Census.

- Hunterdon and Salem counties have two of the highest infant death rates; although a relatively small number of infant deaths (2) occurred in each county. This may be attributed to the lower percentage of infants living in these counties.

DYFS Region Where Child Death Occurred for Children under the Age of One

	Frequency	Percent
Metro	25	35.7
South	21	30.0
North	18	25.7
Central	6	8.6
Adoption	0	0.0
Total	70	100.0

- 61.4% of all deaths occurred in the Metro and North DYFS Regions. The remaining 38.6% occurred in the South and Central Regions.

Manner of Child Death by DYFS Status for Children Under the Age of One

	Open	Closed	No Contact with DYFS	Total
Physical Abuse/Intent to Injure				
Abuse - Father	4	0	7	11
Abuse - Other Male	0	1	2	3
Abuse - Mother	4	2	1	7
Abuse - Other	1	0	2	3
Abuse - Unknown	0	0	0	0
Unintentional Injury				
Lack of Supervision - Misc.	0	3	3	6
Lack of Supervision - Pool	0	0	0	0
Lack of Supervision - Fire	0	0	1	1
Lack of Supervision - Bathtub	2	0	1	3
Undetermined/Other				
Neglect	1	1	1	3
Drug Use During Pregnancy	11	4	1	16
Shaken Baby	2	1	6	9
Newborn Abandoned/Killed	0	0	3	3
Medical Neglect	1	1	0	2
Other or Unknown	0	2	1	3
Total	26	15	29	70

- DYFS had closed cases on 50% of the families with children who died due to Miscellaneous Lack of Supervision.

- DYFS was currently involved or had some prior contact with one-third of the families in which children died due to Shaken Baby Syndrome.
- Eleven of 16 deaths (68.8%) due to drug use during pregnancy were open DYFS cases. However, 4 of these 11 cases (36%) were only opened directly after the birth of the child.
- Seven of the 11 deaths (63.6%) due to physical abuse by father were not known to DYFS prior to the incident.
- Four of the 7 (36%) deaths due to physical abuse by a mother were open DYFS cases.
- DYFS had had contact with 41% of the children who died due to abuse and neglect before the age of one.

APPENDIX A

EXPLANATION OF TERMS

- Page 6:** **Race/Ethnicity** – This item may be self-reported by the individual or based on the DYFS worker’s observation of the individual’s race.
- Page 8:** **Manner of Death** – The categories developed were used to help describe to the reader the circumstances at the time of death. These descriptions help to identify trends and assist in developing possible solutions.
- Page 8:** **Physical Abuse/Intent to Injure:**
 Abuse – Refers to a physical action by the caregiver against the child that resulted in the child’s death. Some examples include: beating, stabbing, burning, drowning, strangulation, asphyxiation, etc.
 Abuse/Other Male – Includes other male relative, boyfriend or male babysitter.
 Abuse/Other – Includes other female relative, girlfriend or female babysitter.
- Page 8:** **Unintentional Injury:**
 Inadequate Supervision – Refers to the failure of an individual placed in charge of the child’s care to adequately supervise the child in order to prevent the fatal incident from occurring.
 Inadequate Supervision/Miscellaneous – Examples include: children falling out of window, drowning in a bucket, etc.
- Page 8:** **Undetermined/Other:**
 Neglect – Refers to a lack of action or withholding of care by the caregiver to prevent the child’s death. Some examples include: malnutrition, lack of shelter, etc.
 Medical Neglect – Refers to lack of medical or surgical care when the child is in imminent need of such care, e.g., seizure, unresponsiveness, high fever, etc.
- Page 8:** **Supervision at Time of Death** – This category provides additional information on the primary person/s who were supervising the child at the time of death.
- Page 9:** **Cumulative Child Death Rate-** For counties with smaller child populations, small changes in the numbers of child deaths can lead to large changes in the child death rate.
- Page 9:** **DYFS Case Status** - This item does not differentiate cases not known to DYFS prior to the incident, but due to a prolonged hospital stay after the critical incident, the child was reported to DYFS and coded as an open case prior to the child's death.
- Page 18:** **Infant Death Rate-** For counties with smaller child populations, small changes in the numbers of infant deaths can lead to large changes in the infant death rate.